PTO/SB/17 (10-08)

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For I	First Name		T.M. Cough				
	Examiner N		T. M. Gough				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit		1657			
TOTAL AMOUNT OF PAYMEN	IT	(\$) 260.00	Attorney Do	ocket No.	4265-0101PUS	51 ————	
METHOD OF PAYMENT	Г (check all t	hat apply)					
Check Credit Card Money Order None Other (please identify): X Deposit Account Number Q2-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
	sit Account Numb			eposit Account Name	` 	Noiascii &	DIICH, LLF
For the above-identi	•		i i	·			
x Charge fee(s)			_ =	narge tee(s) inc	dicated below, ex	cept for t	ne tiling tee
fee(s) under 3		s) or underpayment and 1.17	s of x C	redit any overp	ayments		
FEE CALCULATION	AND EVAL	**************************************					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type		Small Entity	Small E	ntity	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	330	165 54	10 270	220	110		
Design	220	110 10	00 50	140	70		
Plant	220	110 33	30 165		85		
Reissue	330		10 270		325		
Provisional	220	110	0 0	0	0		
2. EXCESS CLAIM FEES						Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over 20 (includi	na Daissues)	•				52	26
Each independent claim over	-					220	110
Multiple dependent claims	(-6 - to 100 mon)				390	195
			Fee Paid (\$)	M	ultiple Depende	ent Claims	3
11 20-or HP = x =						ee Paid (\$	-
HP = highest number of total clair	ns paid for, if g	reater than 20.					
Indep. Claims Ext	ra Claims	Fee (\$)	Fee Paid (\$)				
3- or HP =	×	=					
HP = highest number of independ	·	for, if greater than 3.					
3. APPLICATION SIZE FEE If the specification and dra listings under 37 CFR 1	wings excee	d 100 sheets of par application size fee	er (excluding of due is \$270 (\$	electronically fit 135 for small en	led sequence or ontity) for each ac	computer Iditional 5	0
sheets or fraction thereo	of. See 35 U	.S.C. 41(a)(1)(G) a	nd 37 CFR 1.1	6(s).			
<u>Total Sheets</u> <u>Ex</u>	tra Sheets	·		or fraction thereo		Fee	<u>Paid (\$)</u>
- 100 =		/50 =	(round up to	a whole number)	× =	·	
S. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00							
Other (e.g., late filing su	cept Colored	ot Colored Drawings			130.00		
SUBMITTED BY	 						
Signature Signature	unn	na	Registration N (Attorney/Agen		Telephone	(703) 20	5-8000
<u> </u>	* V V I I I		(Altorrio)/Agen	7			

Date

November 10, 2008

Signature